

<input type="checkbox"/> REPORTABLE PROPERTY DAMAGE		<input checked="" type="checkbox"/> NON-REPORTABLE		STATE OF DELAWARE UNIFORM TRAFFIC COLLISION REPORT						1. 09-02-36437 2. 5514 3. COMPLAINT NO. 4. DSP HQ. NO. (LEAVE BLANK)										
<input type="checkbox"/> PERSONAL INJURY		<input type="checkbox"/> LATE REPORT																		
<input type="checkbox"/> FATALITY		<input type="checkbox"/> HAZ/MAT.																		
		<input type="checkbox"/> COMM. VEH.																		
3. MON. - DATE - YEAR	4. DAY	5. TIME OCCURRED	6. NOTIFIED	7. ARRIVED	8. GRID NO.	9. SECTOR	10. LIGHT CONDITION													
04/23/02	TU	0813			/															
10. NUMBER & NAME OF STREET OR HIGHWAY - CTY. RTE. NO. • INTERSECTING WITH STREET OR ROAD - CTY. RTE. NO.								11. INTERSECTING WITH STREET OR ROAD - CTY. RTE. NO.												
OLD BALTIMORE PIKE C/R 336 • 1/2								NON. FEET N/E												
11. NON. FEET N/E								12. WEATHER CONDITION												
INTSECT. 150 MILES S/W OF: GOODWIN DR. NO C/R #								13. SURFACE CONDITION												
16. PRIM. CONTRIB. 8. SPEED TOO FAST 11. DISREGARD TRAFFIC SIGNAL 14. FOLLOWING TOO CLOSE 17. MECH. DEFECT								18. TRAFFIC CONTROL												
CIRCUM. 9. FAIL TO YIELD ROW 12. DROVE LEFT OF CENTER 15. MADE IMPROPER TURN 16. DRIVING UNDER INFLUENCE								19. FUNCT. PROPER												
10. PASSED STOP SIGN 13. IMPROPER PASSING																				
17. COLLISION INVOLVED	18. ON RDWY.	19. EMERG. RESPON.	20. MILES	N/E	IN:	CITY OR TOWN	21. CTY.	22. CODE	23. MILE POINT											
S				S/W	OF:															
24. NAME LAST	25. STREET ADDRESS	26. NAME LAST	27. STREET ADDRESS	28. NAME LAST	29. STREET ADDRESS	30. NAME LAST	31. STREET ADDRESS	32. NAME LAST	33. STREET ADDRESS											
NO. 1 ADAMS	186 INDEPENDENCE DR	NO. 2 SHELDON	708 PEBBLE BEACH DR	NO. 3 TOELLEN	1 C	NO. 4	31. STATE	32. DOB	33. AGE	34. SEX										
26. CITY ELKTON	27. STATE MD	28. ZIP 21921	29. PHONE 410 392 6421	26. CITY ELKTON	27. STATE MD	28. ZIP 21921	29. PHONE 410 392 3216	31. STATE MD	32. DOB	33. AGE	34. SEX MF									
30. DRIVERS LICENSE NO.	31. STATE	32. DOB	33. AGE	34. SEX	35. SOBRIETY	36. TESTED	37. TYPE	38. RESULT 0. %	39. TEST NUMBER	40. SOBRIETY	41. TESTED	42. TYPE	43. RESULT 0. %	44. TEST NUMBER						
98	HONDA	ACCORD	40. MODEL	41. BODY STYLE	98	VOLVO	S70	42. SOBRIETY	43. VEHICLE MAKE	44. MODEL	45. BODY	46. STYLE	47. REGISTRATION NO.	48. STATE	49. COLOR	50. DAMAGE	51. TRAILERS			
42. REGISTRATION NO. GRX 191	43. STATE MD	44. COLOR SIL	45. DAMAGE \$20.00	46. TRAILERS 0 1 2 3	42. REGISTRATION NO. HLR 539	43. STATE MD	44. COLOR BLUE	45. DAMAGE \$20.00	46. TRAILERS 0 1 2 3	47. VEHICLE/TRACTOR OWNER: LAST	48. STREET	49. CITY	50. STATE							
47. VEHICLE/TRACTOR OWNER: LAST	FIRST	M.I.	47. VEHICLE/TRACTOR OWNER: LAST	FIRST	M.I.	48. STREET	CITY	STATE	49. INSURANCE COMPANY STATE FARM	50. CHARGE/SECTION NO. 20 7218 712	51. ARREST NO.	50. INSURANCE COMPANY STATE FARM	51. CHARGE/SECTION NO. 205754 A16 20	51. ARREST NO.						
52. NO. 1 TOWED BY:	1. REAR	2. PASSING	3. ANGLE	4. RIGHT TURN	5. RIGHT TURN	11. OTHER	52. NO. 2 TOWED BY:													
TO:							TO:													
53.	6. HEAD ON	7. SIDESWIPE	8. INDICATE OBJECT	9. LEFT TURN	10. LEFT TURN		53.													
CODE WITNESS INFORMATION: (NAME, ADDRESS, PHONE NO., LOCATION)										EXHIBIT	PENGAD 600-631-6969									
55. NO WITNESS										1. YES	37. MV IN TRANSPORT									
V-1 WAS STOPPED FACING E/B. ON O/B P FOR TRAFFIC IN FRONT OF HER. V-2 WAS STOPPED APPROX 3' BEHIND V-1. V-2 MOVED FORWARD V-2'S F BUMPER STRUCK V-1'S R BUMPER FOR A PT 6 1/2 SEOR AND 150 1/2 GOODWIN DR. FRP BOTH VEHICLES AT PT										2. NO	38. NON-COL. OVERTURN									
OP-1 STATED SHE WAS STOPPED FOR TRAFFIC IN FRONT OF HER WHEN SHE WAS STRUCK BY V-2										3. UNKNOWN	40. PEDESTRIAN									
										4. N/A	41. PARKED VEHICLE									
										5. PENDING	42. RAILROAD TRAIN									
										6. NONE	43. PEDALCYCLIST									
										7. OTHER	44. ANIMAL									
										12. LIGHT COND.	45. FIXED OBJECT									
										18. DAYLIGHT	46. OTHER OBJECT									
										19. DAWN/DUSK	47. OTHER NON-COLLIS.									
										20. DARK/LIT	35. SOBRIETY									
										21. DARK/UNLIT	48. NOT DRINKING									
										13. WEATHER	49. HBD NOT IMPAIRED									
										22. CLEAR	50. HBD IMPAIRMENT UNK									
										23. RAIN	51. UNDER THE INFLUENCE									
										24. SNOW/SLEET	52. PBT									
										25. FOG	53. BREATH									
										26. CLOUDY	37. BLOOD } TYPE									
										14. SURFACE	54. BLOOD									
										27. DRY	55. URINE									
										28. WET	41. BODY STYLE									
										29. SNOWY	56. PASSENGER CAR									
										30. ICY	57. PICK-UP TRUCK									
										15. CONTROLS	58. VAN/PANEL TRUCK									
										31. STOP SIGN	59. FARM VEHICLE									
										32. STOP & GO LIGHT	60. MOTORCYCLE									
										33. Yield SIGN	61. BUS									
										34. WARNING SIGN	62. SCHOOL BUS									
										35. LANE MARKINGS	63. 6 WHEEL TRUCK									
										36. FLASHING SIGNAL	64. 10 WHEEL TRUCK									
										58. REVIEWER	65. TRACT. & SEMI. TR.(S)									
56. INVESTIGATING OFFICER R. LEWIS										59. PAGE 1 OF 2										
RANK CPL																				
I.D. NUMBER 394																				
57. SUPERVISOR'S APPROVAL DATE 10/27/02																				

<input checked="" type="checkbox"/> 60. CONTINUATION		STATE OF DELAWARE UNIFORM TRAFFIC COLLISION REPORT CONTINUATION/SUPPLEMENT	
<input type="checkbox"/> 80. SUPPLEMENT		D.S.P. 9 TROOP/DEPARTMENT	
INITIAL REPORT DATE		09-02-36437	
OPERATOR #1		1. COMPLAINT NUMBER	
OPERATOR #2		2. DSP HQ. NO. (LEAVE BLANK)	

56. INVESTIGATING OFFICER	RANK	D. NUMBER	57. SUPERVISOR'S APPROVAL DATE	58. REVIEWER	59.
R. LEWIS	CPL	894	07/04/2002		PAGE <u>2</u> OF <u>2</u>